Center for Educational Performance and Information (CEPI) and Michigan Department of Education (MDE)
MEIS Authorized User Removal Request Form

ISD Code: _____ ISD Name: _____

District Code: _____ District Name: _____

Step 1. **For the requester:** In order for your removal request to be processed, the Department of Information Technology (DIT) Client Service Center must create a case-tracking ticket for you, using the Remedy system. Please enter your contact information below. You will receive notification by e-mail from the Remedy system when the removal you have requested has been completed.

_____   _____
Your Name   Title

_____   _____
Your E-mail Address   Phone

Step 2. Enter the account information of the **individual for whom permissions are to be removed.**

_____   _____   _____
Name of Individual to be Removed   Login Name   MEIS Account Number

Step 3. Select the applications from which this individual should have his/her permissions removed: *(Check all that apply.)*

CEPI Application
- ❑ Administrator Data Review (ADR)
- ❑ Credential Data Exchange (CDX)
- ❑ Financial Information Database (FID)
- ❑ Graduation/Dropout Review and Comment
- ❑ Registry of Educational Personnel (REP)
- ❑ School Code Master (SCM)
- ❑ School Infrastructure Database (SID)
- ❑ Single Record Student Database/Unique Identification Code (SRSD/UIC)
- ❑ Title I Supplemental Educational Services

MDE Application
- ❑ Adequate Yearly Progress (AYP)
- ❑ Annual Vocational Authorization
- ❑ Cash Management Grants
- ❑ Child Nutrition Program (CNP)
- ❑ Michigan Electronic Grants System (MEGS)
- ❑ Migrant Education Data System (MEDS)
- ❑ Online Recommendation
- ❑ School Bus Inventory (SE-4107)
- ❑ School Meals
- ❑ Substitute Permit Application

- ❑ Other, please specify: _____

Step 4. Please check one of the boxes below if you wish to permanently close this person's MEIS account. This should only be done if you wish to prevent the individual from accessing any CEPI or MDE applications for the district.
- ❑ This individual no longer works for the district.
- ❑ This is a duplicate account.
- ❑ User's name is entered incorrectly on the account, or a name change has occurred. *(The user must establish a new MEIS account and complete new security agreements.)*
- ❑ Other, please specify: _____

Step 5. **For the Superintendent/PSA Chief Administrator:** *Please sign below.*
I request that the above-named individual have his/her MEIS account closed and/or permissions removed from the CEPI and/or MDE applications as indicated.

_____   _____
Name of District/Agency   Date

_____   _____
Signature of Superintendent/PSA Chief Administrator   Printed Name and Title

Step 6. **Mail or fax this form to:**   **DIT Client Service Center**   **Fax #: (517) 241-8439**
                                                        235 S. Grand, Suite 304   **E-mail: Help-Desk@michigan.gov**
                                                        Lansing, Michigan 48913